PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (\$71-273-2885)

INSTRUCTIONS: This appropriate. All further condicated unless corrected maintenance fee notification	form should be used : correspondence includi- d below or directed of ons.	or tran ig the l ierwise	smitting the ISS Patent, advance of in Block 1, by 0					
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block i for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompanyi papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.			
23859	7590 07/22	/2008						
Ballard Spahr Andrews & Ingersoll, LLP SUITE 1000 999 PEACHTREE STREET ATLANTA, GA 30309-3915					I hereby certify that this Fecci Transmission I hereby certify that this Fecci Transmist is being deposited with the Unit States Postal Service with sufficient postage for first class mail in an enveloaddressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (571) 273-2885, on the date indicated below.			
AILAITA, OA	30307-3713			L				(Depositor's num
				_				(Signatu
				L				(Da
APPLICATION NO. FILING DATE		FIR		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/785,683 02/24/2004				Sanjay M. Parekh 04159.0001U5 8387				
TITLE OF INVENTION INTERNET USERS						GEO	GRAPHIC LOCATI	ONS OF
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1440	\$0	\$1440		\$1440	10/22/2008
EXAMINER		,	ART UNIT	CLASS-SUBCLASS]			
BARQADLE, YASIN M			2153	709-245000				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.353). (1) the pages of up to 3 registered pages attenues. Ballard Spahr Andrews								
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, & ingersoll, LLP				
Address form F10/Sb/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PT0/Sb/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.								
(A) NAME OF ASSIGN				(B) RESIDENCE: (CIT				
Digital Envoy, Inc.				Norcross, Georgia				
Please check the appropriat	te assignee category or	categori	ies (will not be pr	inted on the patent):	Individual 🖾 Co	rporatio	n or other private gro	ap entity 🗖 Governmen
ia. The following fee(s) are	submitted:		46	. Payment of Fee(s): (Pk	ase first reapply an	y previ	ously paid issue fee s	hown above)
☐ Issue Fee				A check is enclosed.				
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies				☐ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0529 (enclose an extra copy of this form).				
				overpayment, to Dep	osit Account Numbe	r_14-4	J629 (enclose an	extra copy of this form).
 Change in Entity Status a. Applicant claims S 				b. Applicant is no lo	nour claiming SMAT	I EATH	TV status Can 27 CE	B 1 27(-)(2)
NOTE: The Issue Fee and I nterest as shown by the rec				from anyone other than	the applicant; a regis	tered at	torney or agent; or the	assignee or other party
merest as shown by the rec			ii and Trademark	Office.				
Authorized Signature	/David A. Co	rnett/			Date	Septe	mber 26, 2008	
Typed or printed name _	David A. Co				Registration N		48,417	
This collection of information application. Confidential ubmitting the completed a his form and/or suggestion 30x 1450, Alexandria, Virginia 22313	on is required by 37 Cl lity is governed by 35 pplication form to the is for reducing this burginia 22313-1450. DO -1450.	R 1.31 J.S.C. I USPTO len, sho NOT SI	The informatio Z2 and 37 CFR Time will vary uld be sent to the END FEES OR C	n is required to obtain or 1.14. This collection is ed depending upon the indi Chief Information Offic COMPLETED FORMS T	retain a benefit by the timated to take 12 n vidual case. Any cor- er, U.S. Patent and C O THIS ADDRESS.	e public sinutes t mments fradema SEND	which is to file (and o complete, including on the amount of tim rk Office, U.S. Depar TO: Commissioner for	by the USPTO to process gathering, preparing, an e you require to complet tment of Commerce, P.C. or Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.